



Enrollment Form

Child's Name _____ Birthdate _____

I would like to enroll my child beginning (please enter the first date you would like your child to attend school) _____ for the following days and times:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

I understand that monthly tuition is due on the fifth of the month for that month's tuition. (Check, cash or credit card is accepted.) Morningstar Learning Center will provide an invoice to me no later than the 1st of each month for the amount due. When payment is not received by the 5th of the month, I hereby give Morningstar Learning Center permission to charge the following credit card the total amount due that month.

Please circle the card you are providing: VISA MASTERCARD AMEX

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Name as it Appears on Card: _____

The Billing Address and Phone Number Associated with this Credit Card:

Card Holder's Signature: _____

Please complete the back of this form!

I hereby agree to follow the Morningstar Learning Center policies stated below as indicated by my initials on each line and my signature below:

_____ I understand that I must provide a copy of my child's updated immunization records **before** my child can attend Morningstar Learning Center, per the State of Montana Licensing Regulations. (There are medical exceptions to this rule, please inquire if needed.)

_____ I have received a copy of the Morningstar Learning Center Rates, Policies, Handbook and Calendar for the 2011-2012 school year.

_____ I have received a copy of the Morningstar Learning Center School Sample Daily Schedule and What to Bring.

_____ I understand a \$20 per day late fee will be assessed on all late tuition payments.

_____ I understand 30 days written notice is required to cancel my child's enrollment. If 30 days notice is not given, I understand that I am responsible for payment of tuition. I further understand if notice is given due to a planned vacation, my child will be removed from enrollment and their space will be available to new enrollees during my absence. I understand that my child enrollment can continue upon return if notification is given in advance.

_____ I understand that credit is not given for sick days missed beyond the control of Morningstar Learning Center.

_____ I understand a one time \$50 materials fee will be due upon my child's enrollment.

_____ I understand a one time \$100 deposit will be refunded at the end of the school year if all policies and regulations are adhered to throughout my child's enrollment at Morningstar Learning Center.

_____ I understand that a \$1 per minute early/late fee will be charged for each minute my child is dropped off before 8:30am or picked up after 5:30pm. Out of respect for teachers and fairness to the children in attendance, I agree to drop off and pick up my child on time.

Parent's Printed Name

Parent's Signature

Date